

# REGISTRATION FORM

[CLICK HERE TO REGISTER ONLINE](#)

**ALL FIELDS REQUIRED.**

Your Conference Attendance:  First Time!!!  my # \_\_\_\_ year How many years have you been in the risk management profession? \_\_\_\_

First & Last Name \_\_\_\_\_ Title \_\_\_\_\_

Professional Credentials/Certifications \_\_\_\_\_

TDI License # \_\_\_\_\_ Entity/Employer \_\_\_\_\_

Work Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Special Needs (ADA) \_\_\_\_\_

I am interested in obtaining continuing education credit for the following:  None  HRCI  SHRM  Certified Case Manager (CCM)

Other CE I would like Texas PRIMA to consider: \_\_\_\_\_

## SIGN ME UP FOR THE TEXAS PRIMA 2024 CONFERENCE

	OCTOBER 14 OR EARLIER	OCTOBER 15 OR LATER
Public Entity	<input type="checkbox"/> \$ 400	<input type="checkbox"/> \$ 450
Risk Pool	<input type="checkbox"/> \$ 600	<input type="checkbox"/> \$ 650
Corporate	<input type="checkbox"/> \$ 700	<input type="checkbox"/> \$ 750
Student**	<input type="checkbox"/> \$ 175	<input type="checkbox"/> \$ 200

(\*\*Must provide proof of status) **ALL FEES INCLUDE Texas PRIMA MEMBERSHIP**

**OPT OUT OF EVENTS:**

If you need to miss a conference function, please let us know. This helps us plan for the proper number of guests by those not able to attend (opting-out.)

- Sunday – Welcome Reception..... 6:00 PM – 7:00 PM
- Monday – Membership Lunch ..... 12:30 PM – 1:30 PM
- Monday Night Networking & Dinner ..... 7:00 PM – 12:00 AM
- Tuesday – Awards Luncheon..... 12:00 PM – 1:15 PM

**PLEASE NOTE:** Attendance at Texas PRIMA events constitutes an agreement by the attendee to Texas PRIMA's use and distribution of the attendee's images or voice in photographs and recordings of such events and activities. By providing your email address you agree to receive emails from Texas PRIMA and sponsoring organizations. Unless you inform Texas PRIMA that you object, permission is assumed.

# PAYMENT INFORMATION

[CLICK HERE TO REGISTER ONLINE](#)

E-MAIL: [info@texasprima.org](mailto:info@texasprima.org)

MAIL: Register & pay by check: TEXAS PRIMA, P.O. BOX 92373, AUSTIN TX 78709

## CONFERENCE REGISTRATION INCLUDES:

- Exhibit Hall & Session Access
  - Welcome Reception
  - Monday Night Networking & Dinner (1 ticket)
  - Sponsor Appreciation Reception
  - Monday & Tuesday Luncheons
  - One-year Texas PRIMA Membership  
*Public Entity \$75 | Risk Pool \$150*  
*Corporate \$225 | Student \$10*
- OPT ME OUT of the Texas PRIMA MEMBERSHIP (fee remains the same)

## FEES DUE/SUBTOTAL

Complete this section, indicating corresponding payment amounts; enter total in TOTAL PAYMENT DUE / ENCLOSED below.

### CONFERENCE REGISTRATION FEE

(from the registration option that you selected)..... \$ \_\_\_\_\_

### GUEST TICKET(S)

Registration includes 1 ticket to each event listed below. If you would like to purchase guest tickets, please complete the section below.

Monday Night Networking & Dinner     \$65 each x \_\_\_\_\_ extra tickets     \$ \_\_\_\_\_

Tuesday Awards Luncheon             \$50 each x \_\_\_\_\_ extra tickets     \$ \_\_\_\_\_

### TOTAL PAYMENT DUE / ENCLOSED

(must equal amounts indicated in fees due/guest ticket sections above)     \$ \_\_\_\_\_

### SELECT PAYMENT TYPE

MASTERCARD    VISA    AMEX    CHECK *(For payment by check, do not staple payment to form.)*

Card Number: \_\_\_\_\_ Sec. Code (required): \_\_\_\_\_

Cardholder Phone Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

